

United States Bankruptcy Court

Middle District of North Carolina

Voluntary Petition

| | |
|--|---|
| Name of Debtor (if individual, enter Last, First, Middle): Carolina Mattress Guild, Inc. | Name of Joint Debtor (Spouse) (Last, First, Middle): |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): |
| Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) 56-1749033 | Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) |
| Street Address of Debtor (No. and Street, City, and State): 385 North Dr. Thomasville, NC <div style="text-align: right;">ZIP Code 27360</div> | Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right;">ZIP Code</div> |
| County of Residence or of the Principal Place of Business: Davidson | County of Residence or of the Principal Place of Business: |
| Mailing Address of Debtor (if different from street address): <div style="text-align: right;">ZIP Code</div> | Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right;">ZIP Code</div> |
| Location of Principal Assets of Business Debtor (if different from street address above): | |

| | | |
|---|--|--|
| Type of Debtor (Form of Organization) (Check one box) <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) | Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other | Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding |
| Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: | Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code). | Nature of Debts (Check one box) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts. |

| | |
|--|--|
| Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. | Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). |
|--|--|

| | | | | | | | | | | | |
|---|--|---|---|---|---|--|---|---|---|--|--|
| Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. | THIS SPACE IS FOR COURT USE ONLY | | | | | | | | | | |
| Estimated Number of Creditors <table style="width:100%; text-align: center;"> <tr> <td><input type="checkbox"/> 1-49</td> <td><input type="checkbox"/> 50-99</td> <td><input type="checkbox"/> 100-199</td> <td><input checked="" type="checkbox"/> 200-999</td> <td><input type="checkbox"/> 1,000-5,000</td> <td><input type="checkbox"/> 5,001-10,000</td> <td><input type="checkbox"/> 10,001-25,000</td> <td><input type="checkbox"/> 25,001-50,000</td> <td><input type="checkbox"/> 50,001-100,000</td> <td><input type="checkbox"/> OVER 100,000</td> </tr> </table> | <input type="checkbox"/> 1-49 | <input type="checkbox"/> 50-99 | <input type="checkbox"/> 100-199 | <input checked="" type="checkbox"/> 200-999 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> 25,001-50,000 | <input type="checkbox"/> 50,001-100,000 | <input type="checkbox"/> OVER 100,000 | |
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 50-99 | <input type="checkbox"/> 100-199 | <input checked="" type="checkbox"/> 200-999 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> 25,001-50,000 | <input type="checkbox"/> 50,001-100,000 | <input type="checkbox"/> OVER 100,000 | | |
| Estimated Assets <table style="width:100%; text-align: center;"> <tr> <td><input type="checkbox"/> \$0 to \$50,000</td> <td><input type="checkbox"/> \$50,001 to \$100,000</td> <td><input type="checkbox"/> \$100,001 to \$500,000</td> <td><input type="checkbox"/> \$500,001 to \$1 million</td> <td><input checked="" type="checkbox"/> \$1,000,001 to \$10 million</td> <td><input type="checkbox"/> \$10,000,001 to \$50 million</td> <td><input type="checkbox"/> \$50,000,001 to \$100 million</td> <td><input type="checkbox"/> \$100,000,001 to \$500 million</td> <td><input type="checkbox"/> \$500,000,001 to \$1 billion</td> <td><input type="checkbox"/> More than \$1 billion</td> </tr> </table> | <input type="checkbox"/> \$0 to \$50,000 | <input type="checkbox"/> \$50,001 to \$100,000 | <input type="checkbox"/> \$100,001 to \$500,000 | <input type="checkbox"/> \$500,001 to \$1 million | <input checked="" type="checkbox"/> \$1,000,001 to \$10 million | <input type="checkbox"/> \$10,000,001 to \$50 million | <input type="checkbox"/> \$50,000,001 to \$100 million | <input type="checkbox"/> \$100,000,001 to \$500 million | <input type="checkbox"/> \$500,000,001 to \$1 billion | <input type="checkbox"/> More than \$1 billion | |
| <input type="checkbox"/> \$0 to \$50,000 | <input type="checkbox"/> \$50,001 to \$100,000 | <input type="checkbox"/> \$100,001 to \$500,000 | <input type="checkbox"/> \$500,001 to \$1 million | <input checked="" type="checkbox"/> \$1,000,001 to \$10 million | <input type="checkbox"/> \$10,000,001 to \$50 million | <input type="checkbox"/> \$50,000,001 to \$100 million | <input type="checkbox"/> \$100,000,001 to \$500 million | <input type="checkbox"/> \$500,000,001 to \$1 billion | <input type="checkbox"/> More than \$1 billion | | |
| Estimated Liabilities <table style="width:100%; text-align: center;"> <tr> <td><input type="checkbox"/> \$0 to \$50,000</td> <td><input type="checkbox"/> \$50,001 to \$100,000</td> <td><input type="checkbox"/> \$100,001 to \$500,000</td> <td><input type="checkbox"/> \$500,001 to \$1 million</td> <td><input checked="" type="checkbox"/> \$1,000,001 to \$10 million</td> <td><input type="checkbox"/> \$10,000,001 to \$50 million</td> <td><input type="checkbox"/> \$50,000,001 to \$100 million</td> <td><input type="checkbox"/> \$100,000,001 to \$500 million</td> <td><input type="checkbox"/> \$500,000,001 to \$1 billion</td> <td><input type="checkbox"/> More than \$1 billion</td> </tr> </table> | <input type="checkbox"/> \$0 to \$50,000 | <input type="checkbox"/> \$50,001 to \$100,000 | <input type="checkbox"/> \$100,001 to \$500,000 | <input type="checkbox"/> \$500,001 to \$1 million | <input checked="" type="checkbox"/> \$1,000,001 to \$10 million | <input type="checkbox"/> \$10,000,001 to \$50 million | <input type="checkbox"/> \$50,000,001 to \$100 million | <input type="checkbox"/> \$100,000,001 to \$500 million | <input type="checkbox"/> \$500,000,001 to \$1 billion | <input type="checkbox"/> More than \$1 billion | |
| <input type="checkbox"/> \$0 to \$50,000 | <input type="checkbox"/> \$50,001 to \$100,000 | <input type="checkbox"/> \$100,001 to \$500,000 | <input type="checkbox"/> \$500,001 to \$1 million | <input checked="" type="checkbox"/> \$1,000,001 to \$10 million | <input type="checkbox"/> \$10,000,001 to \$50 million | <input type="checkbox"/> \$50,000,001 to \$100 million | <input type="checkbox"/> \$100,000,001 to \$500 million | <input type="checkbox"/> \$500,000,001 to \$1 billion | <input type="checkbox"/> More than \$1 billion | | |

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Carolina Mattress Guild, Inc.**All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location

Where Filed: **- None -**

Case Number:

Date Filed:

Location

Where Filed:

Case Number:

Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor:

- None -

Case Number:

Date Filed:

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.

Exhibit B

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

X

Signature of Attorney for Debtor(s)

(Date)

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.

☒ No.

Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☐ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

Information Regarding the Debtor - Venue

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)

(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Carolina Mattress Guild, Inc.**Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____
Signature of Debtor

X _____
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of Attorney*

X /s/ Stephanie L. Osborne
Signature of Attorney for Debtor(s)

Stephanie L. Osborne 29374
Printed Name of Attorney for Debtor(s)

Northern Blue, L.L.P.
Firm Name

1414 Raleigh Road, Suite 435
P.O. Box 2208
Chapel Hill, NC 27515-2208

Address

(919) 968-4441
Telephone Number

December 15, 2014
Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Neal Grigg
Signature of Authorized Individual

Neal Grigg
Printed Name of Authorized Individual

President
Title of Authorized Individual

December 15, 2014
Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X _____
Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X _____
Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

United States Bankruptcy Court
Middle District of North Carolina

In re **Carolina Mattress Guild, Inc.**,
 Debtor

Case No. _____

Chapter **7**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|------------------|---------------------|---------------------|------------|
| A - Real Property | Yes | 1 | 0.00 | | |
| B - Personal Property | Yes | 4 | 1,702,097.88 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 4 | | 3,040,077.81 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 31 | | 94,495.26 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 27 | | 2,791,711.40 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | No | 0 | | | N/A |
| J - Current Expenditures of Individual Debtor(s) | No | 0 | | | N/A |
| Total Number of Sheets of ALL Schedules | | 70 | | | |
| Total Assets | | | 1,702,097.88 | | |
| Total Liabilities | | | | 5,926,284.47 | |

United States Bankruptcy Court
Middle District of North Carolina

In re **Carolina Mattress Guild, Inc.**,
 Debtor

Case No. _____

Chapter **7**

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

- ☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E) | |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | |
| Student Loan Obligations (from Schedule F) | |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | |
| TOTAL | |

State the following:

| | |
|---|--|
| Average Income (from Schedule I, Line 12) | |
| Average Expenses (from Schedule J, Line 22) | |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14) | |

State the following:

| | | |
|--|--|--|
| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | |
| 4. Total from Schedule F | | |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property | Nature of Debtor's Interest in Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |
|--------------------------------------|---|------------------------------------|--|-------------------------|
|--------------------------------------|---|------------------------------------|--|-------------------------|

None

Sub-Total >

0.00

(Total of this page)

Total >

0.00

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petitioner is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|--|--------------------------------------|---|---|
| 1. Cash on hand | X | | | |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | BB&T Bank of North Carolina | | - - | 2,000.00 0.00 |
| 3. Security deposits with public utilities, telephone companies, landlords, and others. | X | | | |
| 4. Household goods and furnishings, including audio, video, and computer equipment. | X | | | |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | | |
| 6. Wearing apparel. | X | | | |
| 7. Furs and jewelry. | X | | | |
| 8. Firearms and sports, photographic, and other hobby equipment. | X | | | |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | X | | | |
| 10. Annuities. Itemize and name each issuer. | X | | | |

Sub-Total > **2,000.00**
(Total of this page)

3 continuation sheets attached to the Schedule of Personal Property

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|---|---|---|
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | X | | | |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. Accounts receivable. | | Receivables. Debtor to provide detailed list of receivables and supporting information to the Trustee. | - | 551,668.88 |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |

Sub-Total > **551,668.88**
(Total of this page)

Sheet **1** of **3** continuation sheets attached
to the Schedule of Personal Property

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In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|--|---|---|
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| 22. Patents, copyrights, and other intellectual property. Give particulars. | | Registered trademarks | - | 1.00 |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | | Cutomer lists | - | 1.00 |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories. | | 2004 Freightliner Straight Truck Mileage- 225,824 | - | 15,000.00 |
| | | Ford Tandem Tractor Mileage: 1,235,891 | - | 6,000.00 |
| | | 2008 Spinter | - | 15,000.00 |
| | | 1998 Plymouth van Mileage 157,386 | - | 1,500.00 |
| | | 9 Trailers | - | 4,500.00 |
| | | 2012 Audi Mileage 10,979 | - | 22,000.00 |
| | | 2010 Mercedes-Benz Mileage 52,377 | - | 34,000.00 |
| 26. Boats, motors, and accessories. | X | | | |
| 27. Aircraft and accessories. | X | | | |
| 28. Office equipment, furnishings, and supplies. | | Office equipment, computers, work stations, furniture | - | 5,500.00 |
| | | Computers | - | 15,000.00 |
| Sub-Total > | | | | 118,502.00 |
| (Total of this page) | | | | |

Sheet 2 of 3 continuation sheets attached
to the Schedule of Personal Property

Case 14-51366 Doc 1 Filed 12/15/14 Page 9 of 110

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|------------------|---|---|---|
| 29. Machinery, fixtures, equipment, and supplies used in business. | | Slitter, Panel binder, binder block, flanger addition | - | 48,000.00 |
| | | Quilter & Panel Cutter, mattress bagger, ruffler, sewing equipment and sewing stations | - | Unknown |
| | | HVAC and venting system | - | 0.00 |
| | | Border measure/sew, border measure cut, faux taper, gusset maker, upright tapers, double head serger, laminator, Z racks, CMG slitter, yellow carts, cutting table with knife, PC-6, 2 serger flangers, cutting table, machine and storage tables, long arm repair machine, conveyors, baggers, strappers, swivel table, chop saw with table, CMG rotating table, metal rail work station, material handling carts, fork lifts & recharge stations, large carts, mattress compactor, roll packer, tape edges, baler, digital scale, storage rack with wheels, sewing machines, wooden tables, machine shop repairs parts | - | 537,275.00 |
| 30. Inventory. | | Including work in progress, supplies, completed items and returned items. | - | 444,652.00 |
| 31. Animals. | X | | | |
| 32. Crops - growing or harvested. Give particulars. | X | | | |
| 33. Farming equipment and implements. | X | | | |
| 34. Farm supplies, chemicals, and feed. | X | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |

| | |
|----------------------|---------------------|
| Sub-Total > | 1,029,927.00 |
| (Total of this page) | |
| Total > | 1,702,097.88 |

Sheet **3** of **3** continuation sheets attached
to the Schedule of Personal Property

(Report also on Summary of Schedules)

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | H U S B A N D W I F E J O I N T C O M M U N I T Y | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|--------------------------------------|---|---|--|--|--------------------------------------|--|---------------------------------|
| | | | | | | | | |
| Account No. | | | HVAC and venting system | | | | | |
| Ascentium Capital, LLC 23970 US Hwy 59 Kingwood, TX 77339 | | - | | | | | | |
| | | | Value \$ 0.00 | | | | 93,539.00 | 93,539.00 |
| Account No. | | | Automobile Loan | | | | | |
| Audi Fincancial Services PO Box 3 Newberg, OR 97132 | | X - | 2012 Audi Mileage 10,979 | | | | | |
| | | | Value \$ 22,000.00 | | | | 17,919.07 | 0.00 |
| Account No. -2098 | | | October 3, 2011 | | | | | |
| Bank of North Carolina Attn: Legal Dept. 1110 Dover Road Greensboro, NC 27408 | | X - | Uniform Commerical Code Filing Including work in progress, supplies, completed items and returned items. | | | | | |
| | | | Value \$ 444,652.00 | | | | 139,441.46 | 0.00 |
| Account No. | | | March 11, 2013 | | | | | |
| Bank of North Carolina Attn: Legal Dept. 1110 Dover Road Greensboro, NC 27408 | | - | Uniform Commerical Code Filing Including work in progress, supplies, completed items and returned items. | | | | | |
| | | | Value \$ 444,652.00 | | | | 257,467.03 | 0.00 |
| Subtotal (Total of this page) | | | | | | | 508,366.56 | 93,539.00 |

3 continuation sheets attached

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|---|--------------------------------------|------------------|---|--|--|--------------------------------------|--|---------------------------------|
| | | | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | | | | | |
| Account No. 100735 | | | For Notice Purposes Only | | | | | |
| MARKET SQUARE AC II LLC P.O. BOX 417278 BOSTON, MA 02241-7278 | | - | | | | | | |
| | | | Value \$ 0.00 | | | | 0.00 | 0.00 |
| Account No. | | | 2010 Mercedes-Benz Mileage 52,377 | | | | | |
| Mercedes-Benz Financial Services P.O. Box 685 Roanoke, TX 76262 | | X - | | | | | | |
| | | | Value \$ 34,000.00 | | | | 33,000.00 | 0.00 |
| Account No. | | | | | | | | |
| SABA North America, LLC. 2237 Wadhams Road Kimball, MI 48074 | | - | | | | | | |
| | | | Value \$ 0.00 | | | | 44,593.71 | 44,593.71 |
| Account No. CUST NO. 39265 | | | Uniform Commerical Code Filing | | | | | |
| SUSQUEHANNA COMMERCIAL FINANCE 2 COUNTRY VIEW ROAD SUITE 300 MALVERN, PA 19355 | | - | Quilter & Panel Cutter, mattress bagger, ruffler, sewing equipment and sewing stations | | | | | |
| | | | Value \$ Unknown | | | | 169,045.40 | Unknown |
| Account No. 1116567 | | | Panel binder, binder block, flanger addition | | | | | |
| US BANK - ATL ATTACH EQUIP U.S. BANK EQUIPMENT FINANCE 1450 CHANNEL PARKWAY MARSHALL, MN 56258 | | - | | | | | | |
| | | | Value \$ 0.00 | | | | 52,032.00 | 52,032.00 |
| Subtotal | | | | | | | 298,671.11 | 96,625.71 |
| (Total of this page) | | | | | | | | |

Sheet **2** of **3** continuation sheets attached to
Schedule of Creditors Holding Secured Claims

In re Carolina Mattress Guild, Inc.,
Debtor

Case No. _____

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | D A T E C L A I M W A S I N C U R R E D, N A T U R E O F L I E N, A N D D E S C R I P T I O N A N D V A L U E O F P R O P E R T Y S U B J E C T T O L I E N | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | A M O U N T O F C L A I M W I T H O U T D E D U C T I N G V A L U E O F C O L L A T E R A L | U N S E C U R E D P O R T I O N, I F A N Y |
|---|--------------------------------------|--|---|--|--|--------------------------------------|--|--|
| | | | | | | | | |
| Account No. 1116567 | | | Uniform Commerical Code Filing | | | | | |
| US BANK - HORIZ. SLITTER U.S. BANK EQUIPMENT FINANCE 1450 CHANNEL PARKWAY MARSHALL, MN 56258 | | | Slitter, | | | | | |
| | | | Value \$ 48,000.00 | | | | 28,919.15 | 0.00 |
| Account No. | | | | | | | | |
| | | | | | | | | |
| | | | Value \$ | | | | | |
| Account No. | | | | | | | | |
| | | | | | | | | |
| | | | Value \$ | | | | | |
| Account No. | | | | | | | | |
| | | | | | | | | |
| | | | Value \$ | | | | | |
| Account No. | | | | | | | | |
| | | | | | | | | |
| | | | Value \$ | | | | | |
| Subtotal | | | | | | | 28,919.15 | 0.00 |
| (Total of this page) | | | | | | | | |
| Total | | | | | | | 3,040,077.81 | 2,342,961.19 |
| (Report on Summary of Schedules) | | | | | | | | |

Sheet **3** of **3** continuation sheets attached to
Schedule of Creditors Holding Secured Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)**☒ Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☒ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re Carolina Mattress Guild, Inc.
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)**Domestic Support Obligations**

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H U S B A N D W I F E J O I N T C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|---|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | For Notice Purposes Only | | | | | |
| NC CHILD SUPPORT CENTRALIZED COLLECTIONS PO BOX 900012 RALEIGH, NC 27675-9012 | - | | | | | | 0.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| NJ FAMILY SUPPORT PROC CENTER PO BOX 4880 TRENTON, NJ 08650 | - | | | | | | 0.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| NYS CHILD SUPPORT PROCES CNTR PO BOX 15363 ALBANY, NY 12212-5363 | - | | | | | | 0.00 | 0.00 |
| Account No. | | | | | | | | |
| | | | | | | | | |
| Account No. | | | | | | | | |
| | | | | | | | | |
| Subtotal | | | | | | | 0.00 | 0.00 |
| (Total of this page) | | | | | | | 0.00 | 0.00 |

Sheet 1 of 30 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Carolina Mattress Guild, Inc.
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)**Wages, salaries, and commissions**

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. Abel Herrera-Quezada 208 Liberty Dr. Thomasville, NC 27360 | - | | Gross wages from November 2014. | | | | 571.81 | 0.00 571.81 |
| Account No. Albert Phelps, II 551 Gandy Lane Lexington, NC 27295 | - | | Gross wages from November 2014. | | | | 521.64 | 0.00 521.64 |
| Account No. Amanda R. Grigg 1104 North Rotary High Point, NC 27262 | - | | Gross wages from November 2014 | | | | 1,600.00 | 0.00 1,600.00 |
| Account No. Ann S. Bump 201 Lake Drive East Thomasville, NC 27360 | - | | Gross wages from November 2014. | | | | 1,538.46 | 0.00 1,538.46 |
| Account No. Antonio D. Powers 204 Foster St. Apt. Ba Thomasville, NC 27360 | - | | Gross wages from November 2014. | | | | 291.46 | 0.00 291.46 |
| Subtotal (Total of this page) | | | | | | | 4,523.37 | 0.00 4,523.37 |

Sheet 2 of 30 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B T O R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Antonio Dominguez-Gonzalez 731 Will Johnson Rd. Thomasville, NC 27360 | - | | | | | | 410.64 | 0.00 |
| | | | | | | | | 410.64 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Barry W. Leach 211 Fearington Dr. Kernersville, NC 27284 | - | | | | | | 1,412.65 | 0.00 |
| | | | | | | | | 1,412.65 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Benjamin Simmons 1411 Lynwood Terrace High Point, NC 27265 | - | | | | | | 652.67 | 0.00 |
| | | | | | | | | 652.67 |
| Account No. | | | | | | | | |
| BRENDA PETERSON 4584 COLONIAL CIRCLE TRINITY, NC 27370 | - | | | | | | 670.24 | 0.00 |
| | | | | | | | | 670.24 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Brenda Peterson 4584 Colonial Cir. Trinity, NC 27370 | - | | | | | | 472.56 | 0.00 |
| | | | | | | | | 472.56 |
| Subtotal | | | | | | | | 670.24 |
| (Total of this page) | | | | | | | 3,618.76 | 2,948.52 |

Sheet **3** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E | D E B T O R | Husband, Wife, Joint, or Community H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|------------------|----------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | Gross wages from November 2014. | | | | | |
| Calvin J. Junious 410 Davidson St. Thomasville, NC 27360 | | | - | | | | | | 0.00 |
| | | | | | | | | 411.35 | 411.35 |
| Account No. | | | | Gross wages from November 2014. | | | | | |
| Carlos Dominguez-Gomez 514 Center St. Lexington, NC 27292 | | | - | | | | | | 0.00 |
| | | | | | | | | 605.50 | 605.50 |
| Account No. | | | | Gross wages from November 2014. | | | | | |
| Cecilia S. Garcia 718 Westchester Key Apt. P High Point, NC 27262 | | | - | | | | | | 0.00 |
| | | | | | | | | 357.28 | 357.28 |
| Account No. | | | | Gross wages from November 2014. | | | | | |
| Christopher Brykailo 3082 Green Tree Rd. Thomasville, NC 27360 | | | - | | | | | | 0.00 |
| | | | | | | | | 384.75 | 384.75 |
| Account No. | | | | Gross wages from November 2014. | | | | | |
| Daniel B. Lewis 105 Lake Rd. Winston Salem, NC 27127 | | | - | | | | | | 0.00 |
| | | | | | | | | 1,800.00 | 1,800.00 |
| Subtotal | | | | | | | | | |
| (Total of this page) | | | | | | | | 3,558.88 | 0.00 |
| | | | | | | | | 3,558.88 | 3,558.88 |

Sheet **4** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

Subtotal
(Total of this page)

0.00
3,558.88

In re Carolina Mattress Guild, Inc.
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)**Wages, salaries, and commissions**

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | Gross wages from November 2014. | | | | | |
| David M. Stroud, Jr. 6 Forsyth St. Thomasville, NC 27360 | - | | | | | | | 0.00 |
| | | | | | | | 478.71 | 478.71 |
| Account No. | | | | | | | | |
| Debbie Fowler 204 Bethlehan Ave. Thomasville, NC 27360 | - | | | | | | | 985.85 |
| | | | | | | | 985.85 | 0.00 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Debra Fowler 204 Bethlehem Ave. Thomasville, NC 27360 | - | | | | | | | 0.00 |
| | | | | | | | 1,038.73 | 1,038.73 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Derrick Black 1009 Unity St. Thomasville, NC 27360 | - | | | | | | | 0.00 |
| | | | | | | | 411.35 | 411.35 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Devin A. Carner 308 Foster St. Apt. 15 Thomasville, NC 27360 | - | | | | | | | 0.00 |
| | | | | | | | 378.29 | 378.29 |
| Subtotal | | | | | | | | 985.85 |
| (Total of this page) | | | | | | | 3,292.93 | 2,307.08 |

Sheet 5 of 30 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. Dustin Hilton 3663 Upperlake Rd. Thomasville, NC 27360 | | - | Gross wages from November 2014. | | | | | Unknown |
| | | | | | | | Unknown | 277.73 |
| Account No. Enrique H. Hernandez 1143 West Green Street Thomasville, NC 27360 | | - | Gross wages from November 2014 | | | | | 0.00 |
| | | | | | | | 1,081.92 | 1,081.92 |
| Account No. ERIC HINSHAW 6 TURNERBERRY CT. DURHAM, NC 27712 | | - | | | | | | 1,262.49 |
| | | | | | | | 1,262.49 | 0.00 |
| Account No. ERNESTO CALIMAYOR 711 RAPP STREET THOMASVILLE, NC 27360 | | - | | | | | | 443.63 |
| | | | | | | | 443.63 | 0.00 |
| Account No. Flormaria Meza 803 Virginia Dr. Lexington, NC 27295 | | - | Gross wages from November 2014. | | | | | 0.00 |
| | | | | | | | 743.52 | 743.52 |
| Subtotal | | | | | | | | 1,706.12 |
| (Total of this page) | | | | | | | 3,531.56 | 2,103.17 |

Sheet **6** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E | B O R O W E R | H U S B A N D | W I F E | J O I N T | O R | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|------------------|---------------------------------|---------------------------------|------------------|-----------------------|--------|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | | | | | | | | |
| FRANCISCO MADRIGAL 123 COLLEGE STREET THOMASVILLE, NC 27360 | | | | | | | | | | | 581.25 |
| | | | | | | | | | | 581.25 | 0.00 |
| Account No. | | | | | | | | | | | |
| Francisco Ramirez-Castillo 211 Dorthothy St. Apt. E High Point, NC 27262 | | | | | | | | | | | 0.00 |
| | | | | | | | | | | 460.44 | 460.44 |
| Account No. | | | | | | | | | | | |
| Freddy Pastern 437 JD Essick Rd. Lexington, NC 27295 | | | | | | | | | | | 0.00 |
| | | | | | | | | | | 521.86 | 521.86 |
| Account No. | | | | | | | | | | | |
| Gabriela Flores Martnez 233 Dorothy Street High Point, NC 27262 | | | | | | | | | | | 237.91 |
| | | | | | | | | | | 237.91 | 0.00 |
| Account No. | | | | | | | | | | | |
| Graciano Cazarin-Reyes 2209 Chambers St. High Point, NC 27263 | | | | | | | | | | | 0.00 |
| | | | | | | | | | | 460.44 | 460.44 |
| Subtotal | | | | | | | | | | | 819.16 |
| (Total of this page) | | | | | | | | | | 2,261.90 | 1,442.74 |

Sheet **7** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E | D E B T O R | Husband, Wife, Joint, or Community H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|------------------|----------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | Gross wages from November 2014 | | | | | |
| Grant A. Lyndon 50 West Holly Hill, Apt. 1 Thomasville, NC 27360 | | | - | | | | | | 0.00 |
| | | | | | | | | 458.72 | 458.72 |
| Account No. | | | | Gross wages from November 2014 | | | | | |
| Gregory D. Hairston 319 West Main Street Thomasville, NC 27360 | | | - | | | | | | 0.00 |
| | | | | | | | | 373.92 | 373.92 |
| Account No. | | | | Gross wages from November 2014. | | | | | |
| Henry Aguilar-Diaz 214 Long St. Thomasville, NC 27360 | | | - | | | | | | 0.00 |
| | | | | | | | | 707.20 | 707.20 |
| Account No. | | | | Gross wages from November 2014. | | | | | |
| Hilary P. Pope 6731 Maize Dr. High Point, NC 27265 | | | - | | | | | | 0.00 |
| | | | | | | | | 1,584.62 | 1,584.62 |
| Account No. | | | | Gross wages from November 2014. | | | | | |
| Ismael Flores-Aguilar 1619 Conner Pl High Point, NC 27260 | | | - | | | | | | 0.00 |
| | | | | | | | | 437.90 | 437.90 |
| Subtotal | | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | | 3,562.36 | 3,562.36 |

Sheet **8** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Jamarr Q. Camp 408 Brewer St. Thomasville, NC 27360 | - | | | | | | | 0.00 |
| | | | | | | | 134.93 | 134.93 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| John H. Campbell 1020 W. Oakwood Ave. Albemarle, NC 28001 | - | | | | | | | 0.00 |
| | | | | | | | 802.66 | 802.66 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| John R. Maynor 152 Creekside Dr. Asheboro, NC 27203 | - | | | | | | | 0.00 |
| | | | | | | | 304.52 | 304.52 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Johnmy Holleman PO Box 1213 1459 Garner Rd. Denton, NC 27239 | - | | | | | | | 0.00 |
| | | | | | | | 1,402.60 | 1,402.60 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Jose A. Cruz Morales 407 Coltrane Ave. High Point, NC 27260 | - | | | | | | | 0.00 |
| | | | | | | | 635.81 | 635.81 |
| Subtotal | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | 3,280.52 | 3,280.52 |

Sheet **9** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Joseph S. Jones, Jr. 116 Pineywood St. Thomasville, NC 27360 | - | | | | | | 295.13 | 0.00 |
| | | | | | | | | 295.13 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Justtin Weisenhorn 1725 Remington Point Ct. Walkertown, NC 27051 | - | | | | | | 307.09 | 0.00 |
| | | | | | | | | 307.09 |
| Account No. | | | For Notice Purposes Only | | | | | |
| KATHRYN GRIGG 226 ETHAN DRIVE HIGH POINT, NC 27265 | - | | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Kenneth L. Clark 1025-A Pegram Ave. High Point, NC 27263 | - | | | | | | 197.02 | 0.00 |
| | | | | | | | | 197.02 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Kevin E. Stewart 4123 Abbotts Creek Ct. Kernersville, NC 27284 | - | | | | | | 478.20 | 0.00 |
| | | | | | | | | 478.20 |
| Subtotal | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | 1,277.44 | 1,277.44 |

Sheet **10** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Carolina Mattress Guild, Inc.
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)**Wages, salaries, and commissions**

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Kevin M. White 940 Payne Rd. Lexington, NC 27295 | - | | | | | | 394.11 | 0.00 |
| | | | | | | | | 394.11 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Luciano Ochoa-Herrera 1203 Holly Grove Rd. Lexington, NC 27292 | - | | | | | | 273.79 | 0.00 |
| | | | | | | | | 273.79 |
| Account No. | | | | | | | | |
| LUIS F RODRIGUEZ-REYES 7108 PROSPECT CHURCH RD #22 THOMASVILLE, NC 27360 | - | | | | | | 416.50 | 0.00 |
| | | | | | | | | 416.50 |
| Account No. | | | | | | | | |
| LUIS G RODRIGUEZ REYES 7108 PROSPECT CHURCH RD #22 THOMASVILLE, NC 27360 | - | | | | | | 56.88 | 0.00 |
| | | | | | | | | 56.88 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Luis J. Martinez-Montalvo 256 Beddington St. High Point, NC 27260 | - | | | | | | 702.81 | 0.00 |
| | | | | | | | | 702.81 |
| Subtotal | | | | | | | | 473.38 |
| (Total of this page) | | | | | | | 1,844.09 | 1,370.71 |

Sheet 11 of 30 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B T O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | | | | | |
| LUISA MEZA MENDOSA 1411 HOLLY GROVE ROAD LEXINGTON, NC 27292 | - | | | | | | 385.00 | 385.00 |
| | | | | | | | 385.00 | 0.00 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Maria D. Leon Lopez 501 Albertson Rd., Lot 13 Thomasville, NC 27360 | - | | | | | | 0.00 | 0.00 |
| | | | | | | | 326.32 | 326.32 |
| Account No. | | | | | | | | |
| MARILYN GUERRERO 1600 KANOY ROAD LOT 23 THOMASVILLE, NC 27360 | - | | | | | | 160.00 | 160.00 |
| | | | | | | | 160.00 | 0.00 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Mark A. Hall 903 Carolina Ave. Thomasville, NC 27360 | - | | | | | | 0.00 | 0.00 |
| | | | | | | | 896.32 | 896.32 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Melissa H. Chahoc 3755 Field Sedge Dr. Winston Salem, NC 27107 | - | | | | | | 0.00 | 0.00 |
| | | | | | | | 533.63 | 533.63 |
| Subtotal | | | | | | | | 545.00 |
| (Total of this page) | | | | | | | 2,301.27 | 1,756.27 |

Sheet **12** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Carolina Mattress Guild, Inc.
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)**Wages, salaries, and commissions**

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. Michael Q. Huynh 803 Virginia Dr. SC 29295 | | - | Gross wages from November 2014. | | | | 638.95 | 0.00 638.95 |
| Account No. Mitchell Garland 909 Marlboro St. High Point, NC 27260 | | - | Gross wages from November 2014. | | | | 1,540.00 | 0.00 1,540.00 |
| Account No. NEAL GRIGG 978 NOTTINGHAM RD HIGH POINT, NC 27262 | | - | For Notice Purposes Only | | | | 0.00 | 0.00 0.00 |
| Account No. Neil Hoggard 113-C Cox Ave. Thomasville, NC 27360 | | - | Gross wages from November 2014. | | | | 185.68 | 0.00 185.68 |
| Account No. Nikita Vinson 27 Curry St. Lexington, NC 27292 | | - | Gross wages from November 2014. | | | | 588.17 | 0.00 588.17 |
| Subtotal (Total of this page) | | | | | | | 2,952.80 | 0.00 2,952.80 |

Sheet 13 of 30 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B T O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|--|--------------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | | | | | |
| ODILIA SANCHEZ-RODRIGUEZ 114 CONRAD STREET THOMASVILLE, NC 27360 | | - | | | | | 483.00 | 483.00 |
| | | | | | | | 483.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| OHIO ATTORNEY GENERAL PO BOX 89471 CLEVELAND, OH 44101-6471 | | - | | | | | 0.00 | 0.00 |
| | | | | | | | 0.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| OHIO BUREAU OF WORKERS' COMP BWC STATE INSURANCE FUND CORPORATE PROCESSING DEPT COLUMBUS, OH 43271-0821 | | - | | | | | 0.00 | 0.00 |
| | | | | | | | 0.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| OHIO DEPARTMENT OF COMMERCE 6606 TUSSING ROAD PO BOX 4009 REYNOLDSBURG, OH 43068-9009 | | - | | | | | 0.00 | 0.00 |
| | | | | | | | 0.00 | 0.00 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Oscar Centeno-Ramirez 107 Carolina Ave Thomasville, NC 27360 | | - | | | | | 0.00 | 0.00 |
| | | | | | | | 511.96 | 511.96 |
| Subtotal | | | | | | | | 483.00 |
| (Total of this page) | | | | | | | 994.96 | 511.96 |

Sheet **14** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Oscar Rodriguez-Lopez 316 Williamson St. Lexington, NC 27292 | - | | | | | | 407.02 | 0.00 |
| | | | | | | | | 407.02 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Pablo Parra-Aldan 213 Polk St. Apt. F Thomasville, NC 27360 | - | | | | | | 538.99 | 0.00 |
| | | | | | | | | 538.99 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Paula J. Barker 315 Walker St. Thomasville, NC 27360 | - | | | | | | 238.10 | 0.00 |
| | | | | | | | | 238.10 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Rafael Herrera 705 Burgess St. Lexington, NC 27292 | - | | | | | | 2,384.62 | 0.00 |
| | | | | | | | | 2,384.62 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Reginald Dalton 330 Gibson Pond Way Lexington, NC 27295 | - | | | | | | 832.20 | 0.00 |
| | | | | | | | | 832.20 |
| Subtotal | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | 4,400.93 | 4,400.93 |

Sheet **15** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Carolina Mattress Guild, Inc.
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)**Wages, salaries, and commissions**

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Rhonda Christian 22 Landon Ave. Thomasville, NC 27360 | - | | | | | | 409.61 | 0.00 |
| | | | | | | | | 409.61 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Ricky L. Roark 5675 Old Thomasville Rd. PO Box 48 Archdale, NC 27263 | - | | | | | | 329.18 | 0.00 |
| | | | | | | | | 329.18 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Ricky Smith 3231 Pine Needles Rd. High Point, NC 27265 | - | | | | | | 329.18 | 0.00 |
| | | | | | | | | 329.18 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Robert Love 205 H.E. Clement Lane Thomasville, NC 27360 | - | | | | | | 1,465.17 | 0.00 |
| | | | | | | | | 1,465.17 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Roberto Girarte-Alvarez 209 Kinview Dr. Archdale, NC 27263 | - | | | | | | 449.80 | 0.00 |
| | | | | | | | | 449.80 |
| Subtotal | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | 2,982.94 | 2,982.94 |

Sheet 16 of 30 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D W I F E J O I N T C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|---|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Sandra Amaya-Guerrero 1507 Larkin St. High Point, NC 27262 | - | | | | | | | 0.00 |
| | | | | | | | 409.76 | 409.76 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Sara Messer 1959 Kennedy Farm Road N. Thomasville, NC 27360 | - | | | | | | | 0.00 |
| | | | | | | | 1,196.50 | 1,196.50 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Shawn Griffin 1301 Florence Ave. Thomasville, NC 27360 | - | | | | | | | 0.00 |
| | | | | | | | 501.68 | 501.68 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Stanley Young 158 Eastwood Rd. Winston Salem, NC 27107 | - | | | | | | | 0.00 |
| | | | | | | | 210.72 | 210.72 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Terry A. Porter 465 Larry Lane Lexington, NC 27292 | - | | | | | | | 0.00 |
| | | | | | | | 287.28 | 287.28 |
| Subtotal | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | 2,605.94 | 2,605.94 |

Sheet **17** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Carolina Mattress Guild, Inc.
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)**Wages, salaries, and commissions**

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Terry Bruner 145 Blaze St. Winston Salem, NC 27105 | - | | | | | | | 0.00 |
| | | | | | | | 267.52 | 267.52 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Terry Curry 278 Cow Palace Rd. Thomasville, NC 27360 | - | | | | | | | 0.00 |
| | | | | | | | 347.85 | 347.85 |
| Account No. | | | | | | | | |
| TOM REHWINKEL 12 BRISTOL COURT SKILLMAN, NJ 08558 | - | | | | | | | 329.74 |
| | | | | | | | 329.74 | 0.00 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Tony Adams 2736 Buckhorn Dr. Randleman, NC 27317 | - | | | | | | | 0.00 |
| | | | | | | | 424.88 | 424.88 |
| Account No. | | | Gross wages from November 2014. | | | | | |
| Vicki Yonchuk 1950 Upper Lake Rd. Thomasville, NC 27360 | - | | | | | | | 0.00 |
| | | | | | | | 853.73 | 853.73 |
| Subtotal | | | | | | | | 329.74 |
| (Total of this page) | | | | | | | 2,223.72 | 1,893.98 |

Sheet 18 of 30 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E | D E B T O R | Husband, Wife, Joint, or Community H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|------------------|----------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | For Notice Purposes Only | | | | | |
| VIRGINIA EMPLOYMENT COMMISSION PO BOX 1174 RICHMOND, VA 23218-1174 | | | - | | | | | 0.00 | 0.00 |
| Account No. | | | | Gross wages from November 2014. | | | | 43.42 | 43.42 |
| Wesley O Nance 4182 Salem Church Rd. Denton, NC 27239 | | | - | | | | | 0.00 | 0.00 |
| Account No. | | | | Gross wages from November 2014. | | | | 72.80 | 72.80 |
| Wilifredy Lopez-Chang 410 Berkley St. High Point, NC 27260 | | | - | | | | | 0.00 | 0.00 |
| Account No. | | | | Gross wages from November 2014. | | | | 939.20 | 939.20 |
| William C. Cagle, Jr. 19 Candlestick Dr. Thomasville, NC 27360 | | | - | | | | | 0.00 | 0.00 |
| Account No. | | | | Gross wages from November 2014. | | | | 879.75 | 879.75 |
| William H. Kirkman, III 2440 Herfhsire Dr. Greensboro, NC 27406 | | | - | | | | | 0.00 | 0.00 |
| Subtotal | | | | | | | | 1,935.17 | 0.00 |
| (Total of this page) | | | | | | | | 1,935.17 | 1,935.17 |

Sheet **19** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E | D E B T O R | Husband, Wife, Joint, or Community H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|------------------|----------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | | | | | | |
| COMMONWEALTH OF MASS. - TAXES CORPORATIONS DIVISION ONE ASHBURTON PLACE BOSTON, MA 02108-1512 | | | - | | | | | 125.00 | |
| | | | | | | | | 125.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| COMMONWEALTH OF MASSACHUSETTS DEPT OF PUBLIC HEALTH, FOOD PROTECTION PROGRAM 305 SOUTH STREET JAMAICA PLAIN, MA 02130-3597 | | | - | | | | | 0.00 | |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| COMMONWEALTH OF PENNSYLVANIA DEPT. OF LABOR AND INDUSTRY BEDDING & UPHOLSTERY SECTION 651 BOAS STREET HARRISBURG, PA 17121 | | | - | | | | | 0.00 | |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| COMMONWEALTH OF VIRGINIA DEPARTMENT OF HEALTH BEDDING & UPHOLSTERED FURN INS P.O. BOX 2448 - ROOM 521 RICHMOND, VA 23218 | | | - | | | | | 10.04 | |
| | | | | | | | | 10.04 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| COMPTROLLER OF PUBLIC ACCOUNTS PO BOX 149348 AUSTIN, TX 78714-9348 | | | - | | | | | 0.00 | |
| | | | | | | | | 0.00 | 0.00 |
| Subtotal | | | | | | | | | 135.04 |
| (Total of this page) | | | | | | | | 135.04 | 0.00 |

Sheet **20** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|--|---------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | For Notice Purposes Only | | | | | |
| CONNECTICUT - STATE TAXES DEPT OF REVENUE PO BOX 2936 HARTFORD, CT 06104 | | - | | | | | 0.00 | |
| | | | | | | | 0.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| Davidson County Tax 28 W. Center St. Lexington, NC 27292 | | - | | | | | 0.00 | |
| | | | | | | | 0.00 | 0.00 |
| Account No. | | | | | | | | |
| DAVIDSON COUNTY TAX COLLECTOR 913 GREENSBORO STREET PO BOX 1577 (ZIP 27293) LEXINGTON, NC 27292 | | - | | | | | 40,001.78 | |
| | | | | | | | 40,001.78 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| DIVISION OF CHILD SUPPORT SERV FAMILY SUPPORT REGISTRY PO BOX 1800 CARROLLTON, GA 30112-1800 | | - | | | | | 0.00 | |
| | | | | | | | 0.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| FLORIDA DEPT OF REVENUE LAKE CITY SERVICE CENTER 1401 WEST US HWY 90, STE. 100 LAKE CITY, FL 32055 | | - | | | | | 0.00 | |
| | | | | | | | 0.00 | 0.00 |
| Subtotal | | | | | | | | 40,001.78 |
| (Total of this page) | | | | | | | 40,001.78 | 0.00 |

Sheet **21** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E | D E B T O R | Husband, Wife, Joint, or Community | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|--|------------------|----------------------------|------------------------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | | | | | | |
| GEORGIA DEPT OF LABOR PO BOX 740234 ATLANTA, GA 30374-0234 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | | | | | | |
| GEORGIA DEPT OF REVENUE PROCESSING CENTER PO BOX 740238 ATLANTA, GA 30374-0238 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | | | | | | |
| GERRY NEWMAN 115 STETHEM DRIVE CENTEREACH, NY 11720 | | | - | | | | | 688.16 | 0.00 |
| | | | | | | | | 688.16 | 0.00 |
| Account No. | | | | | | | | | |
| GUILFORD COUNTY TAX DEPARTMENT PO BOX 3328 GREENSBORO, NC 27402 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | | | | | | |
| Internal Revenue Service Centralized Insolvency Operations P O Box 7346 Philadelphia, PA 19101-7346 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Subtotal | | | | | | | | 688.16 | 0.00 |
| (Total of this page) | | | | | | | | 688.16 | 0.00 |

Sheet **22** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E | D E B T O R | Husband, Wife, Joint, or Community H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|------------------|----------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | | | | | | |
| JERRY M CLONINGER 4184 WEDGEWOOD TRAIL TRINITY, NC 27370 | | | - | | | | | 249.38 | 249.38 |
| | | | | | | | | 249.38 | 0.00 |
| Account No. | | | | | | | | | |
| JOSE A RAMIREZ 910 FISHER FERRY ST, APT A THOMASVILLE, NC 27360 | | | - | | | | | 433.13 | 433.13 |
| | | | | | | | | 433.13 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| LOUISIANA DEPT OF REVENUE PO BOX 91011 BATON ROUGE, LA 70821-9011 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| MARYLAND - STATE TAXES REVENUE ADMINISTRATION DIV. 110 CARROLL STREET ANNAPOLIS, MD 21411-0001 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| MASS. DEPARTMENT OF REVENUE PO BOX 7025 BOSTON, MA 02204 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Subtotal | | | | | | | | | 682.51 |
| (Total of this page) | | | | | | | | 682.51 | 0.00 |

Sheet **23** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E | D E B T O R | Husband, Wife, Joint, or Community H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|--|------------------|----------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | For Notice Purposes Only | | | | | |
| NC Department of Revenue Attn: Bankruptcy Dept 501 N Wilmington Street P.O. Box 25000 Raleigh, NC 27640-5000 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. 42-02-878-7 | | | | For Notice Purposes Only | | | | | |
| NC DEPT COMMERCE DIV OF EMPLOYMENT SECURITY PO BOX 26504 RALEIGH, NC 27611-6504 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| NEW JERSEY - STATE TAXES DIV. OF TAXATION PO BOX 666 TRENTON, NJ 08646-0666 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| NEW JERSEY DEPT LABOR & WORKFORCE DEVELOPMENT DIV EMPLOYER ACCOUNTS PO BOX 059 TRENTON, NJ 08625-0059 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| NEW JERSEY DIV OF TAXATION REVENUE PROESSING CENTER PO BOX 244 TRENTON, NJ 08646-0244 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Subtotal | | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | | 0.00 | 0.00 |

Sheet **24** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E | D E B T O R | Husband, Wife, Joint, or Community H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|------------------|----------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | For Notice Purposes Only | | | | | |
| NEW YORK STATE UNEMPLOYMENT INSURANCE PO BOX 4301 BINGHAMTON, NY 13902-4301 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| NJ DEPARTMENT OF THE TREASURY DIV OF REVENUE & ENTERPRISE SERVICES/CORP FILING UNIT PO BOX 308 TRENTON, NJ 08646-0308 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. 2922438 | | | | | | | | | |
| NORTH CAROLINA DEPT OF REVENUE PO BOX 25000 RALEIGH, NC 27640 | | | - | | | | | 1,748.23 | 0.00 |
| | | | | | | | | 1,748.23 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| NYS CORPORATION TAX PROCESSING UNIT PO BOX 22094 ALBANY, NY 12201-2094 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| OHIO DEPT OF TAXATION PO BOX 181140 COLUMBUS, OH 43218-1140 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Subtotal | | | | | | | | | 1,748.23 |
| (Total of this page) | | | | | | | | 1,748.23 | 0.00 |

Sheet **25** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | A M O U N T O F C L A I M | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|--|--------------------------------------|--|--|--|--|--------------------------------------|---|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | For Notice Purposes Only | | | | | |
| ORANGE COUNTY TAX COLLECTOR P O BOX 545100 ORLANDO, FL 32854-5100 | - | | | | | | 40.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| PA DEPT OF REV.-BEDDING LIC. BUREAU OF RECEIPTS AND CONTROL DEPT. 280403 HARRISBURG, PA 17128-0403 | - | | | | | | 0.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| PA DEPT/REVENUE-CORPORATE TAX PO BOX 280422 HARRISBURG, PA 17128-0422 | - | | | | | | 0.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| PA DEPT/REVENUE-NONRESIDENT PO BOX 280403 HARRISBURG, PA 17128-0403 | - | | | | | | 0.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| PA DEPT/REVENUE-STATE TAXES PO BOX 280427 HARRISBURG, PA 17128-0427 | - | | | | | | 0.00 | 0.00 |
| Subtotal | | | | | | | 40.00 | 0.00 |
| (Total of this page) | | | | | | | 40.00 | 0.00 |

Sheet **26** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E | D E B T O R | Husband, Wife, Joint, or Community H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|------------------|----------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | For Notice Purposes Only | | | | | |
| PENNSYLVANIA DEPT OF REVENUE BUREAU OF IMAGING & DOCUMENT MANAGEMENT HARRISBURG, PA 17128-0403 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| RANDOLPH COUNTY TAX COLLECTOR 725 MCDOWELL ROAD ASHEBORO, NC 27205 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| RHODE ISLAND DEPT. OF BUSINESS REGULATION 1511 PONTIAC AVE. BLDG 69-1 CRANSTON, RI 02920 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| SC DEPARTMENT OF REVENUE LICENSE AND REGISTRATION UNIT COLUMBIA, SC 29214-0140 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| SC DEPT OF REVENUE (CORP) CORPORATE TAXES COLUMBIA, SC 29214 | | | - | | | | | 0.00 | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Subtotal | | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | | 0.00 | 0.00 |

Sheet **27** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H U S B A N D W I F E J O I N T O R | H U S B A N D W I F E J O I N T O R | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|--|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | For Notice Purposes Only | | | | | |
| SC DEPT OF REVENUE - TAXES COLUMBIA, SC 29211 | | | - | | | | | | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| SC DEPT OF REVENUE - TAXES COLUMBIA, SC 29214 | | | - | | | | | | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| SOUTH CAROLINA DEPT EMPLOYMENT AND WORKFORCE PO BOX 7103 COLUMBIA, SC 29202 | | | - | | | | | | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. 2051160-000 | | | | For Notice Purposes Only | | | | | |
| SOUTH CAROLINA DEPT OF REVENUE NOA COLUMBIA, SC 29214-0030 | | | - | | | | | | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | For Notice Purposes Only | | | | | |
| SOUTH CAROLINA DEPT OF REVENUE WITHHOLDING COLUMBIA, SC 29214 | | | - | | | | | | 0.00 |
| | | | | | | | | 0.00 | 0.00 |
| Subtotal | | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | | 0.00 | 0.00 |

Sheet **28** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | A M O U N T O F C L A I M | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|--|--------------------------------------|--|--|--|--|--------------------------------------|---|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | For Notice Purposes Only | | | | | |
| STATE OF CONNECTICUT DEPT OF CONSUMER PROTECTION PO BOX 1869 HARTFORD, CT 06144-1869 | - | | | | | | 0.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| STATE OF FLORIDA DISBURSE UNIT 000016229DR48 PO BOX 8500 TALLAHASSEE, FL 32314-8500 | - | | | | | | 0.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| TENNESSEE DEPT OF REVENUE ANDREW JACKSON STATE OFC BLDG 500 DEADERICK STREET NASHVILLE, TN 37242 | - | | | | | | 0.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| TEXAS COMPTROLLER COMPTROLLER OF PUBLIC ACCOUNTS PO BOX 149348 AUSTIN, TX 78714-9348 | - | | | | | | 50.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| TN DEPT OF LABOR/WORKFORCE DEV EMP SEC DIV EMP ACCTS OPER PO BOX 101 NASHVILLE, TN 37202-0101 | - | | | | | | 0.00 | 0.00 |
| Subtotal | | | | | | | 50.00 | 50.00 |
| (Total of this page) | | | | | | | 50.00 | 0.00 |

Sheet **29** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

**Taxes and Certain Other Debts
Owed to Governmental Units**

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | A M O U N T O F C L A I M | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|--|--|--|--|--------------------------------------|---|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | For Notice Purposes Only | | | | | |
| VIRGINIA DEPT OF TAXATION PO BOX 1777 RICHMOND, VA 23218-1777 | - | | | | | | 0.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| WEST VIRGINIA DIV OF LABOR BEDDING SECTION ROOM 749 BDG 6 CAPITOL COMPLEX CHARLESTON, WV 26306 | - | | | | | | 0.00 | 0.00 |
| Account No. | | | For Notice Purposes Only | | | | | |
| WEST VIRGINIA STATE TAX DEPT INTERNAL AUDITING DIVISION PO BOX 11751 CHARLESTON, WV 25339-1751 | - | | | | | | 0.00 | 0.00 |
| Account No. | | | | | | | | |
| | | | | | | | | |
| Account No. | | | | | | | | |
| | | | | | | | | |
| Subtotal | | | | | | | 0.00 | 0.00 |
| (Total of this page) | | | | | | | 0.00 | 0.00 |
| Total | | | | | | | 94,495.26 | 45,414.78 |
| (Report on Summary of Schedules) | | | | | | | | |

Sheet **30** of **30** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|--------------------------------------|------------------------------------|--|--|--------------------------------------|------------------|
| | | H W J C | | | | |
| Account No. 03210-001495000 | | | | | | |
| ACCOUNTEMPS 12400 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693 | | - | | | | 2,500.00 |
| Account No. C3055 | | | | | | |
| ADHESIVE PRODUCTS COMPANY 9635 PARK DAVIS DRIVE INDIANAPOLIS, IN 46235 | | - | | | | 1,186.00 |
| Account No. | | | | | | |
| ADVANCE FIBER TECHNOLOGIES 344 LODI STREET HACKENSACK, NJ 07601-3120 | | - | | | | 17,220.89 |
| Account No. | | | | | | |
| AEC NARROW FABRICS 150 NORTH PARK STREET ASHEBORO, NC 27203 | | - | | | | 1,007.65 |
| Subtotal (Total of this page) | | | | | | 21,914.54 |

26 continuation sheets attached

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|--|--|--------------------------------------|-------------------|
| | | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| Account No. | | | | | | |
| ATLANTA ATTACHMENT 362 INDUSTRIAL PARK DRIVE LAWRENCEVILLE, GA 30046 | - | | | | | 2,535.72 |
| Account No. | | | | | | |
| Bank of America P.O.Box 1091 Charlotte, NC 28254 | - | | | | | 102,233.25 |
| Account No. 18985 | | | | | | |
| BANK OF THE WEST DEPT LA 23091 PO BOX 7167 PASADENA, CA 91109-7167 | - | | | | | 1,214.75 |
| Account No. 10295 | | | | | | |
| BECHIK PRODUCTS, INC. 1020 DISCOVERY ROAD, STE 150 EAGAN, MN 55121 | - | | | | | 577.56 |
| Account No. | | | | | | |
| BECO INC. PO BOX 2023 HIGH POINT, NC 27261 | - | | | | | 210.50 |
| Sheet no. <u>2</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | |
| Subtotal (Total of this page) | | | | | | 106,771.78 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|--|--|--------------------------------------|----------------------------------|
| | | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| Account No. | | | | | | |
| BRANSON'S AUTO SERVICE, INC. 210 EAST MAIN ST. THOMASVILLE, NC 27360 | - | | | | | 56.35 |
| Account No. | | | | | | |
| BRENTWOOD TEXTILES P.O. Box 1124 HIGH POINT, NC 27261 | - | | | | | 7,127.50 |
| Account No. POLICY# 0196-18316 | | | | | | |
| BRIDGEFIELD CASUALTY P O BOX 3643 LAKELAND, FL 33802-3643 | - | | | | | 30,213.63 |
| Account No. 1040066-01 | | | | | | |
| BRIGHT HOUSE NETWORKS 3767 ALL AMERICAN BLVD ORLANDO, FL 32810-2418 | - | | | | | 274.86 |
| Account No. | | | | | | |
| CANNON SLEEP 375 S WEST AVE FRESNO, CA 93706 | - | | | | | 2,100.00 |
| Sheet no. <u>3</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) |
| | | | | | | 39,772.34 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|---|--|--|--------------------------------------|--|
| Account No. CHAIR CITY SUPPLY COMPANY, INC P.O. BOX 927 THOMASVILLE, NC 27360 | - | | | | | 434.33 |
| Account No. CINTAS Attn: Accts. Receivables 4345 Federal Drive Greensboro, NC 27410 | - | | | | | 924.02 |
| Account No. 3670 CINTAS CORP #45 4345 FEDERAL DRIVE GREENSBORO, NC 27410 | - | | | | | 2,067.99 |
| Account No. 073-12044 CINTAS CORP. #073 FLORIDA ACCT P.O. BOX 630910 CINCINNATI, OH 45263-0910 | - | | | | | 249.06 |
| Account No. CITY OF THOMASVILLE PO BOX 368 THOMASVILLE, NC 27360 | - | | | | | 1,366.98 |
| Sheet no. 4 of 26 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 5,042.38 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|--|--|--------------------------------------|------------------|
| | | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| Account No. | | | | | | |
| City of Thomasville 525 Turner St. Thomasville, NC 27360 | - | | | | | 804.88 |
| Account No. | | | | | | |
| COLONIAL LIFE PROCESSING CENTER P.O. BOX 903 COLUMBIA, SC 29202-0903 | - | | | | | 3,115.02 |
| Account No. | | | | | | |
| COLONIAL,LLC PO BOX 148 HIGH POINT, NC 27261 | - | | | | | 14,114.60 |
| Account No. | | | | | | |
| CONCEPT INTN'L TRANSPORTATION 368 SYCAMORE STREET BUFFALO, NY 14204 | - | | | | | 7,200.00 |
| Account No. | | | | | | |
| CRYSTAL SPRINGS 6750 DISCOVERY BLVD MABLETON, GA 30126 | - | | | | | 3.20 |
| Sheet no. <u>5</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | |
| Subtotal (Total of this page) | | | | | | 25,237.70 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|--|--|--------------------------------------|----------------------------------|
| | | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| Account No. | | | | | | |
| CT-NASSAU TAPE, LLC PO BOX 39 4101 S. NC62 ALAMANCE, NC 27201-0039 | - | | | | | 23,360.49 |
| Account No. | | | | | | |
| CT-NASSAU TICKING PO BOX 160 1504 ANTHONY ROAD ALAMANCE, NC 27201-0160 | - | | | | | 105,952.71 |
| Account No. | | | | | | |
| CULP 1823 EASTCHESTER DRIVE HIGH POINT, NC 27265 | - | | | | | 860.05 |
| Account No. | | | | | | |
| D&K TAPE, LLC 200 APPALACHIAN RD FLOYD, VA 24091 | - | | | | | 756.79 |
| Account No. | | | | | | |
| DANIEL L. APPLE APPLE EQUIPMENT COMPANY 565 PAGETOWN RD ELON, NC 27244 | - | | | | | 1,480.00 |
| Sheet no. <u>6</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) |
| | | | | | | 132,410.04 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|------------------------------------|---|--|--|--------------------------------------|-------------------|
| | | H | W | | | | |
| Account No. | | | | | | | |
| DESLEECLAMA NORTH AMERICA 1880 CAMPTON ROAD INMAN, SC 29349 | - | | | | | | 6,932.87 |
| Account No. | | | | | | | |
| DIAMOND ROAD 1635 DIAMOND STATION ROAD EPHRATA, PA 17522 | - | | | | | | 148,641.94 |
| Account No. 294546 | | | | | | | |
| DILLON SUPPLY CO WS 230-010 PO BOX 14506 RALEIGH, NC 27620 | - | | | | | | 305.64 |
| Account No. 1477277707 | | | | | | | |
| DUKE ENERGY P.O. BOX 70516 CHARLOTTE, NC 28272-0516 | - | | | | | | 202.97 |
| Account No. | | | | | | | |
| DUNCAN TICKINGS 1421 NORTHWEST 23RD STREET OKLAHOMA CITY, OK 73106 | - | | | | | | 8,127.09 |
| Sheet no. <u>7</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | |
| Subtotal (Total of this page) | | | | | | | 164,210.51 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|------------------------------------|--|--|--------------------------------------|-------------------|
| | | H W J C | | | | |
| Account No. NCHIG1413 | | | | | | |
| FASTENAL COMPANY 1000 WEST FAIRFIELD RD HIGH POINT, NC 27263 | - | | | | | 212.85 |
| Account No. 78241 | | | | | | |
| FASTENING SOLUTIONS, INC. 3075 SELMA HIGHWAY MONTGOMERY, AL 36108 | - | | | | | 211.14 |
| Account No. | | | | | | |
| FEDERAL EXPRESS PO BOX 371461 PITTSBURGH, PA 15250-7461 | - | | | | | 76.48 |
| Account No. | | | | | | |
| FLEXIBLE FOAM PRODUCTS, INC. CORP OFFICE: 220 S. ELIZABETH ST. SPENCERVILLE, OH 45887 | - | | | | | 77,699.33 |
| Account No. | | | | | | |
| FOAMEX INNOVATIONS ROSE TREE CORPORATE CENTER II 1400 N PROVIDENCE RD. STE 2000 MEDIA, PA 19063-2076 | - | | | | | 148,324.92 |
| Sheet no. <u>8</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | |
| Subtotal (Total of this page) | | | | | | 226,524.72 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|--|--|--------------------------------------|---|
| Account No. FURNITURE TODAY P.O. BOX 10603 RIVERTON, NJ 08076-5003 | - | | | | | 2,589.97 |
| Account No. GLENN'S SEWING MACHINE PO BOX 702 HIGH POINT, NC 27261 | - | For Notice Purposes Only | | | | 40.40 |
| Account No. GLOBAL TEXTILES 2361 HOLIDAY LOOP RD. REIDSVILLE, NC 27320 | - | | | | | 54,652.79 |
| Account No. 840742159 GRAINGER INC. 101 SOUTHCHASE BLVD FOUNTAIN INN, SC 29644-9019 | - | For Notice Purposes Only | | | | 66.49 |
| Account No. 003-0830213-000 GREAT AMERICA FINANCIAL SERV. ACCOUNT SERVICES SUITE 800 625 FIRST STREET SE CEDAR RAPIDS, IA 52401 | - | | | | | 583.70 |
| Sheet no. 9 of 26 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 57,933.35 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|------------------------------------|---|--|--|--------------------------------------|-------------------|
| | | H | W | | | | |
| Account No. | | | | | | | |
| GRIBETZ INTERNATIONAL SAWGRASS INTL CORP PARK 13800 NORTH WEST 4TH ST. SUNRISE, FL 33325 | - | | | | | | 1,870.00 |
| Account No. 253837 | | | | | | | |
| HAFELE AMERICA CO. 3901 CHEYENNE DR. ARCHDALE, NC 27263-4000 | - | | | | | | 1,693.72 |
| Account No. CUST# 51165 | | | | | | | |
| HANES CONVERTING CO. 500 N. McLIN CREEK RD P.O. BOX 457 CONOVER, NC 28613-0457 | - | | | | | | 105,857.76 |
| Account No. | | | | | | | |
| HIGH POINT ENTERPRISE PO BOX 1009 HIGH POINT, NC 27261 | - | | | | | | 171.76 |
| Account No. | | | | | | | |
| HIGH POINT FIBERS 601 OLD THOMASVILLE ROAD HIGH POINT, NC 27260 | - | | | | | | 9,169.41 |
| Sheet no. <u>10</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | |
| Subtotal (Total of this page) | | | | | | | 118,762.65 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|------------------------------------|---|--|--|--------------------------------------|-------------------|
| | | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| Account No. | | | | | | | |
| HILL LIGHTING 1534 NATIONAL HIGHWAY THOMASVILLE, NC 27360 | - | | | | | | 109.14 |
| Account No. | | | | | | | |
| IDEACOM PO BOX 307 KERNERSVILLE, NC 27285 | - | | | | | | 430.00 |
| Account No. | | | | | | | |
| INNOFA USA LLC 716 COMMERCE DRIVE EDEN, NC 27288 | - | | | | | | 196,655.52 |
| Account No. | | | | | | | |
| JG EDELEN PO BOX 824952 PHILADELPHIA, PA 19182 | - | | | | | | 3,009.24 |
| Account No. | | | | | | | |
| JOHN E. FOX, INC. THE FOX COMPANY 2909 INTERSTATE ST. CHARLOTTE, NC 28208 | - | | | | | | 1,037.16 |
| Sheet no. <u>11</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | |
| Subtotal (Total of this page) | | | | | | | 201,241.06 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|------------------------------------|---|--|--|--------------------------------------|------------------|
| | | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| Account No. | | | | | | | |
| JOMEL INDUSTRIES, INC. 140 CENTRAL AVENUE HILLSIDE, NJ 07205 | | - | | | | | 2,406.41 |
| Account No. | | | | | | | |
| KEZIAH GATES LLP PO BOX 2608 NC DEPT INS #3050 HIGH POINT, NC 27261-2608 | | - | | | | | 6,954.12 |
| Account No. | | | | | | | |
| LAMPE USA INC. 3660 NC HIGHWAY 770 A STONEVILLE, NC 27048-8713 | | - | | | | | 8,830.72 |
| Account No. | | | | | | | |
| LANDSTAR RANGER, INC. 13410 SUTTON PARK DRIVE SOUTH JACKSONVILLE, FL 32224 | | - | | | | | 18,125.00 |
| Account No. | | | | | | | |
| LATEXCO LLC 975 GERRARD RD. LAVONIA, GA 30553 | | - | | | | | 9,666.81 |
| Sheet no. <u>12</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | |
| Subtotal (Total of this page) | | | | | | | 45,983.06 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|------------------------------------|---|--|--|--------------------------------------|-------------------|
| | | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| Account No. | | | | | | | |
| LB&A, PLLC 1801 Stanley Rd., Ste. 220 Greensboro, NC 27407 | - | | | | | | 1,470.00 |
| Account No. 60675 | | | | | | | |
| LEGGETT & PLATT SPRINGS HIGHPOINT SPG - 1506 1629 BLANDWOOD DR. HIGH POINT, NC 27260 | - | | | | | | 652,579.69 |
| Account No. 8911495 | | | | | | | |
| Leggett & Platt- Lakeland, FL LEGGETT & PLATT - BR. 0026 2715 CRYSTAL LAKE ACRES DRIVE LAKELAND, FL 33801 | - | | | | | | 8,196.19 |
| Account No. 60675 | | | | | | | |
| Leggett & Platt- Porter Intn'l PORTER INTERNATIONAL 131 ZAPLETAL WAY CARTHAGE, MO 64836 | - | | | | | | 334.58 |
| Account No. | | | | | | | |
| LES TRICOTS MAXIME INC. KNITTING MILLS 828 DESLAURIERS Montreal Canada H4N 1X1 | - | | | | | | 77,077.00 |
| Sheet no. <u>13</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | |
| Subtotal (Total of this page) | | | | | | | 739,657.46 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|--|--|--------------------------------------|---|
| Account No. | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| LINC SYSTEMS, INC. 16540 SOUTHPARK DRIVE WESTFIELD, IN 46074 | - | | | | | 14,581.19 |
| LOGO PROS 4475 K MORRIS PARK DRIVE CHARLOTTE, NC 28227 | - | | | | | 7,989.72 |
| Lowe's PO Box 25428 Charlotte, NC 28229 | - | | | | | 1,232.80 |
| LOWE'S BUSINESS ACCOUNT P O BOX 530970 ATLANTA, GA 30353-0970 | - | | | | | 2,597.17 |
| MARKET SQUARE TRS SHIPPING/REC TRADE SHOW PO BOX 417520 BOSTON, MA 02241-7520 | - | | | | | 10,983.96 |
| Sheet no. 14 of 26 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 37,384.84 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|------------------------------------|---|--|--|--------------------------------------|------------------|
| | | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| Account No. | | | | | | | |
| MARVINS GARAGE DOORS 3521 SMITHERMAN ROAD EAST BEND, NC 27018 | - | | | | | | 2,174.74 |
| Account No. | | | | | | | |
| MCDONALD SERVICES, INC. 7427 PRICE TUCKER ROAD MONROE, NC 28110 | - | | | | | | 1,059.03 |
| Account No. | | | | | | | |
| MINUTE MAN UPHOLSTERY SUPPLY 1905 SOUTH ELM STREET HIGH POINT, NC 27260 | - | | | | | | 78.60 |
| Account No. | | | | | | | |
| MOUNTAIN TOP FOAM 25 ELMWOOD RD MOUNTAIN TOP, PA 18707 | - | | | | | | 24,466.61 |
| Account No. | | | | | | | |
| NAJA VINSON 27 CURRY STREET LEXINGTON, NC 27292 | - | | | | | | 172.38 |
| Sheet no. <u>15</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | |
| Subtotal (Total of this page) | | | | | | | 27,951.36 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|--|--|--------------------------------------|---|
| Account No. 025-7110 NORTH STATE COMMUNICATIONS PO BOX 612 HIGH POINT, NC 27261-0612 | | For Notice Purposes Only | | | | 0.00 |
| Account No. NORTHERN SAFETY CO. 232 INDUSTRIAL PARK DR. FRANKFORT, NY 13340 | | | | | | 246.96 |
| Account No. OFFICE DEPOT 5809 LONGSCREEK PK. DR. CHARLOTTE, NC 28269 | | | | | | 1,293.48 |
| Account No. 035437-000001 OGLETREE, DEAKINS, NASH, SMOAK & STEWART, P.C. PO BOX 89 COLUMBIA, SC 29202 | | | | | | 16,553.38 |
| Account No. 40374 OLD DOMINION FREIGHT PO BOX 198475 ATLANTA, GA 30384-8475 | | | | | | 2,750.34 |
| Sheet no. 16 of 26 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 20,844.16 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | H U S B A N D W I F E J O I N T C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|--------------------------------------|---|---|--|--|--------------------------------------|------------------|
| Account No. | | | | | | | |
| PENSKE TRUCK MAINTENANCE 706 WARD AVE. HIGH POINT, NC 27260 | - | | | | | | 8,199.94 |
| Account No. | | | | | | | |
| PFG 301 N. ELM STREET SUITE 600 GREENSBORO, NC 27401 | - | | | | | | 31,854.78 |
| Account No. | | | | | | | |
| PHOENIX TRIM WORKS 2211 REACH RD. WILLIAMSPORT, PA 17701 | - | | | | | | 11,274.00 |
| Account No. 116863 | | | | | | | |
| PILOT TRAVEL CENTERS LLC PO BOX 11407 BIRMINGHAM, AL 35246-1314 | - | | | | | | 2,144.76 |
| Account No. | | | For Notice Purposes Only | | | | |
| POINTER ELECTRIC PO BOX 2327 HIGH POINT, NC 27261-2327 | - | | | | | | 86.01 |
| <div style="display: flex; justify-content: space-between;"> Sheet no. <u>18</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Subtotal (Total of this page) </div> | | | | | | | 53,559.49 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|--|--|--|-----------------|
| Account No. | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| PREFERRED FURN COMP PO DRAWER 7168 HIGH POINT, NC 27264 | - | | | | | 61.84 |
| PREMIER SUPPLY INC PO BOX 6345 HIGH POINT, NC 27262 | - | | | | | 1,613.96 |
| PROFESSIONAL SUPPORT SERVICES DOT COMPLIANCE SPECIALISTS 717 CAMANN STREET GREENSBORO, NC 27407 | - | | | | | 400.00 |
| PROGRESS ENERGY/DUKE ENERGY P.O. BOX 14042 ST. PETERSBURG, FL 33733 | - | For Notice Purposes Only | | | | 0.00 |
| RELIANCE STANDARD INSURANCE 6101 CARNEGIE BLVD, STE 300 CHARLOTTE, NC 28209 | - | | | | | 2,950.20 |
| Sheet no. 19 of 26 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | Subtotal (Total of this page) | 5,026.00 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|--------------------------------------|---|--|--|--------------------------------------|---|
| Account No. RESPONSE COMPUTER GROUP INC. 213 WEST LIBERTY WAY MILFORD, DE 19963 | - | | | | | 5,628.75 |
| Account No. RIFCO SERVICES, INC. dba JAN-PRO CLEANING SERVICES OF THE TRIAD 201-J POMONA DRIVE GREENSBORO, NC 27407 | - | | | | | 3,008.00 |
| Account No. ROYAL TRANSPORT, INC. 2108 S. ELM ST. HIGH POINT, NC 27260 | - | | | | | 4,400.00 |
| Account No. SAN-GAR ENTERPRISES, INC. 1101 PROSPECT STREET HIGH POINT, NC 27260 | - | | | | | 880.00 |
| Account No. SCHMIDT MACHINE CO, INC. 15446 BLAKELEY TRAIL BELLE PLAINE, MN 56011 | - | | | | | 410.15 |
| Sheet no. 20 of 26 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 14,326.90 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|--|--|--------------------------------------|---|
| Account No. | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| SHAWN PRODUCTS, INC PO BOX 7227 HIGH POINT, NC 27264 | - | | | | | 549.74 |
| SLEEPY'S LLC 1000 SOUTH OYSTER BAY RD HICKSVILLE, NY 11801 | - | | | | | 40,142.21 |
| SOUTHEASTERN FREIGHT PO BOX 100104 COLUMBIA, SC 29202-3104 | - | | | | | 12,906.00 |
| SPECKMAN COMMERCIAL PROPERTIES 1836 EASTCHESTER DR., STE 106 HIGH POINT, NC 27265 | - | | | | | 6,510.00 |
| STN CUSHION COMPANY 3 REGENCY INDUSTRIAL BLVD THOMASVILLE, NC 27361 | - | | | | | 3,150.00 |
| Sheet no. 21 of 26 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 63,257.95 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|------------------------------------|---|--|--|--------------------------------------|------------------|
| | | H | W | | | | |
| Account No. | | | | | | | |
| SUNBELT RENTALS, INC. 2101 W. LANDSTREET RD ORLANDO, FL 32809 | - | | | | | | 1,941.22 |
| Account No. 218405 | | | | | | | |
| SUNSHINE RECYCLING, INC. PO BOX 919360 ORLANDO, FL 32891-9360 | - | | | | | | 213.12 |
| Account No. | | | | | | | |
| SUPERIOR MECHANICAL, INC. PO BOX 877 RANDLEMAN, NC 27317 | - | | | | | | 256.50 |
| Account No. | | | | | | | |
| TECHNA 8401 STERLING BRIDGE RD CHAPEL HILL, NC 27516 | - | | | | | | 9,250.00 |
| Account No. tvillecoc@northstate.net | | | | | | | |
| THOMASVILLE CHAMBER COMMERCE 6 WEST MAIN STREET P.O. BOX 1400 THOMASVILLE, NC 27361-1400 | - | | | | | | 1,352.00 |
| Sheet no. 22 of 26 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | |
| Subtotal (Total of this page) | | | | | | | 13,012.84 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|---|--|--|--------------------------------------|--|
| | | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | | | |
| Account No. 454590 | | | | | | |
| UNITED HEALTHCARE DEPT. CH 10151 6005505151C0009 PALATINE, IL 60055-0151 | - | | | | | 44,659.49 |
| Account No. | | For Notice Purposes Only | | | | |
| UNITED PARCEL SERVICE P.O. BOX 505820 THE LAKES, NV 88905-5820 | - | | | | | 0.00 |
| Account No. | | | | | | |
| UNIVERSAL FOREST PRODUCTS 358 Woodmill Road Salisbury, NC 28145 | - | | | | | 22,243.32 |
| Account No. 513453013-00001 | | | | | | |
| VERIZON WIRELESS P.O. BOX 4001 ACWORTH, GA 30101 | - | | | | | 556.32 |
| Account No. | | | | | | |
| VICTORY PACKAGING, L.P. 350 GILLS DRIVE ORLANDO, FL 32824 | - | | | | | 13,680.00 |
| Sheet no. 24 of 26 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | |
| | | | | | | Subtotal (Total of this page) |
| | | | | | | 81,139.13 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|---|---------------------------------|---|--|--|--------------------------------------|--|
| Account No. 11849377 WASTE MANAGEMENT OF THE CAROLINAS 390 INNOVATION WAY WELLFORD, SC 29385-8900 | - | | | | | 696.87 |
| Account No. 200758604 WELLS FARGO FINANCIAL ACCOUNTS RECEIVABLE P.O. BOX 7777 SAN FRANCISCO, CA 94120-7777 | - | For Notice Purposes Only | | | | 0.00 |
| Account No. 3200000445 WESTFIELD INSURANCE ONE PARK CIRCLE PO BOX 5001 WESTFIELD CTR, OH 44251 | - | | | | | 25,911.62 |
| Account No. 438447 WILCO / HESS FleetOne LLC MSC 30425 PO BOX 415000 NASHVILLE, TN 37241-5000 | - | | | | | 75,012.30 |
| Account No. 14150 Wm.T.Burnett & Co. 2550 West Front Street Statesville, NC 28677 | - | | | | | 135,173.62 |
| Sheet no. 25 of 26 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 236,794.41 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B O R | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM |
|--|---------------------------------|---|--|--|--------------------------------------|--|
| Account No. TENANT# 100735 WMC EXPERIENCES SPE, LLC C/O INTERNATIONAL MARKET CENTR 495 S. GRAND CENTRAL PKWY#2203 LAS VEGAS, NV 89106 | - | | | | | 1,180.00 |
| Account No. WORKERS' COMPENSATION ADMIN TRUST FUND PO BOX 6100 TALLAHASSEE, FL 32399-4216 | - | For Notice Purposes Only | | | | 0.00 |
| Account No. TENANT# 100735 WORLD MARKET CENTER LAS VEGAS 495 S. GRAND CENTRAL PKWY SUITE 2203 LAS VEGAS, NV 89106 | - | | | | | 28,180.00 |
| Account No. MATTGUI WRIGHT OF THOMASVILLE PO BOX 1069 THOMASVILLE, NC 27361 | - | | | | | 8,462.50 |
| Account No. 90-0002550218 XPEDX 3900 SPRING GARDEN ST GREENSBORO, NC 27407 | - | | | | | 43,331.59 |
| Sheet no. 26 of 26 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 81,154.09 |
| Total (Report on Summary of Schedules) | | | | | | 2,791,711.40 |

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

| Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract | Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. |
|--|--|
|--|--|

In re **Carolina Mattress Guild, Inc.**

Case No. _____

Debtor

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|---|--|
| Neal & Kathryn Grigg 226 Ethan Dr. High Point, NC 27265 | Bank of North Carolina Attn: Legal Dept. 1110 Dover Road Greensboro, NC 27408 |
| Neal & Kathryn Grigg 226 Ethan Dr. High Point, NC 27265 | Bank of North Carolina Attn: Legal Dept. 1110 Dover Road Greensboro, NC 27408 |
| Neal & Kathryn Grigg 226 Ethan Dr. High Point, NC 27265 | Bank of North Carolina Attn: Legal Dept. 1110 Dover Road Greensboro, NC 27408 |
| Neal & Kathryn Grigg 226 Ethan Dr. High Point, NC 27265 | Audi Fincancial Services PO Box 3 Newberg, OR 97132 |
| Neal & Kathryn Grigg 226 Ethan Dr. High Point, NC 27265 | Mercedes-Benz Financial Services P.O. Box 685 Roanoke, TX 76262 |
| Neal & Kathryn Grigg 226 Ethan Dr. High Point, NC 27265 | Future Foam, Inc. 1610 Ave. N. Council Bluffs, IA 51501 |
| Neal Grigg | Bank of North Carolina Attn: Legal Dept. 1110 Dover Road Greensboro, NC 27408 |

**United States Bankruptcy Court
Middle District of North Carolina**

In re Carolina Mattress Guild, Inc.

Debtor(s)

Case No.

Chapter

7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the President of the corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 72 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date December 15, 2014

Signature /s/ Neal Grigg

Neal Grigg

President

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court
Middle District of North Carolina**

In re Carolina Mattress Guild, Inc.

Debtor(s)

Case No. _____

Chapter 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | | |
|---|----|-----------------|
| For legal services, I have agreed to accept | \$ | <u>5,000.00</u> |
| Prior to the filing of this statement I have received | \$ | <u>5,000.00</u> |
| Balance Due | \$ | <u>0.00</u> |

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation in any adversary proceedings, or in the event the case is converted to Chapter 11.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: December 15, 2014

/s/ Stephanie L. Osborne

Stephanie L. Osborne 29374
Northern Blue, L.L.P.
1414 Raleigh Road, Suite 435
P.O. Box 2208
Chapel Hill, NC 27515-2208
(919) 968-4441

**United States Bankruptcy Court
Middle District of North Carolina**

In re Carolina Mattress Guild, Inc.

Debtor(s)

Case No. _____

Chapter

7

VERIFICATION OF CREDITOR MATRIX

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: December 15, 2014

/s/ Neal Grigg

Neal Grigg/President

Signer/Title

Credit Bureau
PO Box 26140
Greensboro, NC 27402

Internal Revenue Service
Centralized Insolvency Operations
P O Box 7346
Philadelphia, PA 19101-7346

N.C. Dept. of Revenue
P.O. Box 1168
Raleigh, NC 27603-1168

Abel Herrera-Quezada
208 Liberty Dr.
Thomasville, NC 27360

ACCOUNTEMPS
12400 COLLECTIONS CENTER DRIVE
CHICAGO, IL 60693

ADHESIVE PRODUCTS COMPANY
9635 PARK DAVIS DRIVE
INDIANAPOLIS, IN 46235

ADVANCE FIBER TECHNOLOGIES
344 LODI STREET
HACKENSACK, NJ 07601-3120

AEC NARROW FABRICS
150 NORTH PARK STREET
ASHEBORO, NC 27203

AIR POWER INC.
PO BOX 5406
HIGH POINT, NC 27262

Alan B. Powell
Roberson Haworth & Reece, PLLC
300 N. Main St., Ste. 300
PO Box 1150
High Point, NC 27261

Alan B. Powell
Roberson Haworth & Reece, PLLC
300 N. Main St., Ste. 300
PO Box 1550
High Point, NC 27261

Alan B. Powell
Roberson Haworth & Reece, PLLC
300 N. Main St., Ste. 300
PO Box 1550
High Point, NC 27261

Albert Phelps, II
551 Gandy Lane
Lexington, NC 27295

ALLMAN SPRY
PO BOX 5129
WINSTON SALEM, NC 27113-5129

Amanda R. Grigg
1104 North Rotary
High Point, NC 27262

American Express
PO Box 47500
Jacksonville, FL 32247

AMERITRADE TRUST COMPANY
C/O STANLEY BENEFIT SERVICES
PO BOX 29329
GREENSBORO, NC 27429-9329

Ann S. Bump
201 Lake Drive East
Thomasville, NC 27360

Antonio D. Powers
204 Foster St. Apt. Ba
Thomasville, NC 27360

Antonio Dominguez-Gonzalez
731 Will Johnson Rd.
Thomasville, NC 27360

ARTHUR OLIVER INC.
2406 ENGLISH RD.
PO BOX 88
HIGH POINT, NC 27261

Ascentium Capital, LLC
23970 US Hwy 59
Kingwood, TX 77339

ATLANTA ATTACHMENT
362 INDUSTRIAL PARK DRIVE
LAWRENCEVILLE, GA 30046

Audi Fincancial Services
PO Box 3
Newberg, OR 97132

Bank of America
P.O.Box 1091
Charlotte, NC 28254

Bank of North Carolina
Attn: Legal Dept.
1110 Dover Road
Greensboro, NC 27408

Bank of North Carolina
Attn: Legal Dept.
1110 Dover Road
Greensboro, NC 27408

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1110 Dover Road
Greensboro, NC 27408

Bank of North Carolina
Attn: Legal Dept.
1110 Dover Road
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Bank of North Carolina
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EAGAN, MN 55121

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THOMASVILLE, NC 27360

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TRINITY, NC 27370

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CINTAS CORP #45
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4101 S. NC62
ALAMANCE, NC 27201-0039

CT-NASSAU TICKING
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Council Bluffs, IA 51501

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ARCHDALE, NC 27263-4000

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HIGHPOINT SPG - 1506
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LEGGETT & PLATT - BR. 0026
2715 CRYSTAL LAKE ACRES DRIVE
LAKE LAND, FL 33801

Leggett & Platt- Porter Intn'l
PORTER INTERNATIONAL
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CARTHAGE, MO 64836

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KNITTING MILLS
828 DESLAURIERS
Montreal Canada H4N 1X1

LINC SYSTEMS, INC.
16540 SOUTHPARK DRIVE
WESTFIELD, IN 46074

LOGO PROS
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PO BOX 417520
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COLUMBIA, SC 29214

SC DEPT OF REVENUE - TAXES
COLUMBIA, SC 29211

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**United States Bankruptcy Court
Middle District of North Carolina**

In re Carolina Mattress Guild, Inc.

Debtor(s)

Case No. _____

Chapter 7

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Carolina Mattress Guild, Inc. in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

December 15, 2014

Date

/s/ Stephanie L. Osborne

Stephanie L. Osborne 29374

Signature of Attorney or Litigant

Counsel for Carolina Mattress Guild, Inc.

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